В.

C.

age# 29991004003			
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only o	
Any Information copied from such Reports and State or for commercial purposes, other than using the name of the commercial purposes.			the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) GEOFF DAVIS FOR CONGRESS			
Full Name (Last, First, Middle Initial) Jim Ryun For Congress			Transaction ID: B-E-77626 Date of Disbursement
Mailing Address P.O. Box 826			$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 1 & D \\ 1 & 7 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$
City Topeka Purpose of Disbursement	State Zip Code KS 66601		Amount of Each Disbursement this Period 2000.00
Political Contribution Candidate Name Jim Ryun		011 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	ement For: 2008 Primary General Other (specify)		
Full Name (Last, First, Middle Initial) John Rounsaville For Congress			Transaction ID: B-E-77544 Date of Disbursement O 1
Mailing Address PO Box 2473 City	State Zip Code		Amount of Each Disbursement this Period
Jackson Purpose of Disbursement Political Contribution Candidate Name	MS 39225-2473	011	1000.00 Refund or Disposal of Excess Contributions Required Under
John Rounsaville		Category/ Type	11 C.F.R. 400.53
X	ement For: 2008 Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Kentucky Symphony Orchestra			Transaction ID: B-E-77711 Date of Disbursement
Mailing Address PO Box 72810			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$
City Newport	State Zip Code KY 41072-0810		Amount of Each Disbursement this Period
Purpose of Disbursement Charitable Contribution		012	250.00 Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	ement For: 2008 Primary General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional)			3250.00

TOTAL This Period (last page this line number only)